



**ACKNOWLEDGEMENT OF NOTIFICATION
OF HAZARDOUS WASTE ACTIVITY**

08/29/90

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NYD986911063

FACILITY NAME -> TELEPHONICS CORP

MAILING ADDRESS -> 815 BROADHOLLOW RD
FARMINGDALE, NY 11735

INSTALLATION ADDRESS -> 815 BROADHOLLOW RD
FARMINGDALE, NY 11735

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
26 FEDERAL PLAZA
NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: LACKNER FRANCIS_J MGR FAC
TELEPHONICS CORP
815 BROADHOLLOW RD
FARMINGDALE, NY 11735

4B

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved. OMB No. 2050-0028. Expires 10-31-91
GSA No. 0246-EPA-OT

Please refer to the *Instructions for Filing Notification* before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

90-08-24

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification



B. Subsequent Notification
(complete item C)

C. Installation's EPA ID Number

NY 4 D 9 8 6 9 1 1 0 6 3

II. Name of Installation (Include company and specific site name)

TELEPHONICS CORP.

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

815 BROADHOLLOW ROAD

Street (continued)

City or Town

State

ZIP Code

FARMINGDALE

NY

11735-

County Code

County Name

103 SUFFOLK

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

SAME

City or Town

State

ZIP Code

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

(first)

LACKNER

FRANCIS J.

Job Title

Phone Number (area code and number)

MGR. FACIL/SECUR 516-755-7000

VI. Installation Contact Address (See Instructions)

A. Contact Address
Location Mailing



B. Street or P.O. Box

City or Town

State

ZIP Code

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

ISC FARMINGDALE CORP.

Street, P.O. Box, or Route Number

100 JERICHO QUADRANGLE

City or Town

State

ZIP Code

JERICHO

NY

11753-

Phone Number (area code and number)

B. Land Type

C. Owner Type

D. Change of Owner
Indicator

(Date Changed)

Month Day Year

516-938-5544

P

P

Yes

No

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to instructions.)

A. Hazardous Waste Activity

1. Generator (See Instructions) ☒ 3. Treater, Storer, Disposer (at installation)
a. Greater than 1000kg/mo (2,200 lbs.) Note: A permit is required for this activity; see instructions.
☐ b. 100 to 1000 kg/mo (220 - 2,200 lbs.)
☐ c. Less than 100 kg/mo (220 lbs.)
4. Hazardous Waste Fuel
☐ a. Generator Marketing to Burner
☐ b. Other Marketers
☐ c. Burner - indicate device(s) -
Type of Combustion Device
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
☐ 5. Underground Injection Control
2. Transporter (Indicate Mode in boxes 1-5 below)
☐ a. For own waste only
☐ b. For commercial purposes
Mode of Transportation
☐ 1. Air
☐ 2. Rail
☐ 3. Highway
☐ 4. Water
☐ 5. Other - specify

B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel
☐ a. Generator Marketing to Burner
☐ b. Other Marketer
☐ c. Burner - indicate device(s) -
Type of Combustion Device
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
☐ 2. Specification Used Oil Fuel Marketer
(or On-site Burner) Who First Claims
the Oil Meets the Specification

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☒ 2. Corrosive (D002) ☒ 3. Reactive (D003) ☐ 4. EP Toxic (D000) ☐
(List specific EPA hazardous waste number(s) for the EP Toxic contaminant(s))

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
F 0 0 1	F 0 0 2	F 0 0 3	F 0 0 5		
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring an I.D. number. See instructions.)

1	2	3	4	5	6

X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment.

Signature



Name and Official Title (type or print)

FRANCIS J. LACKNER
MGR. OF FACILITIES & SECURITY

Date Signed

8-20-90

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: February 8, 2016 - 3:56 PM

Version 5.0

User Selection Criteria

Location:	New York, all activities	Activity Location:	None Chosen
Handler ID:	NYD986911063	Group of IDs:	None Chosen
Handler Name:			
Handler Universe:	All Facilities Regardless of Universe		
Determined Date Range:	From: 10/01/1980 To: 02/08/2016		
Location County Code:	None Chosen	Evaluation Type:	
Location City:		Focus Area:	
Location Zip Code:		Violation Type:	
State District:	None Chosen	Display Code Descrip.:	Yes
Sort Order:	Region, State, Handler Name	Display Universes:	Yes

Results

Data meeting the criteria you selected follows.

Total Pages:5 Total Handlers:1

Report Description

This report presents available information from the Resource Conservation and Recovery Act Information System (RCRAInfo) about compliance evaluations, violations, and enforcement actions meeting the criteria supplied by the user. Evaluations showing no violations does not always indicate that no violations were determined. Violation without enforcement actions does not always mean no enforcement action will be issued. In order to avoid releasing enforcement sensitive information to the public the following information is not shown on the report: pending civil / judicial referrals, criminal actions and referrals, and State to EPA referrals; all other enforcement actions are released.

Report Information

Name: cme_foia.rdf
Developed by: EPA Headquarters, Office of Enforcement and Compliance Assurance
Deployed: June 2006
Last Updated: May 2012
Contact: rcrainfo.help@epa.gov
Tables Used: cmecomp3, ccitation3, hreport_univ5, lu_citation, lu_state, hid_groups
Libraries: none

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

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TELEPHONICS CORP

County Name / Code: SUFFOLK / NY103

NYD986911063

Location: 815 BROADHOLLOW RD; FARMINGDALE, NY 11735-3937

REGION 02

Mailing: 815 BROADHOLLOW RD; FARMINGDALE, NY 11735

Activity Location: NY	State District: NYSDEC R1	Accessibility:	Non-Notifier:	Extract Flag: Y	Active Site: Y
Generator: SQG	Transporter: N	Operating TSDF: -----	IC In Place: N	El Indicator (HE / GW): N / N	
Short-Term Gen: N	Transfer Facility: N	Offsite Receiver: N	HSM: N	Subpart K: ---	
Full Enforcement: -----	Converter: -----	State Unaddressed SNC: N	EPA Unaddressed SNC: N		
CA Wrkld: N	State TSDF: -----	State Addressed SNC: N	EPA Addressed SNC: N		
Active State Gen: N		State SNC w/Comp Sched: N	EPA SNC w/Comp Sched: N		

Violation:	Activity Location: NY	Type: 273.B	Determined Date: 06/02/2010	Determined by Agency: State	Responsible Agency: State
	Scheduled Compliance Date:		Actual Compliance Date: 06/02/2010	RTC Qualifier: DOCUMENTED	Sequence Number: 1
	Citation Information: Seq #	Type	Citation		
	1	STATE REGULATION	374-3.2(d)(4)		
CEI Evaluation	06/02/2010	Activity Location: NY	By: State	Identifier: 001	Person: NYTKS
Citizen Complaint: NO		Multimedia Inspection: NO	Sampling: NO	Not Subtitle C: NO	Day Zero: 06/02/2010
Found Violation: YES					Focus Area:
Enforcement:	Activity Location: NY	Type: 120	Action Date: 06/22/2010	Identifier: 001	
Docket:		Agency: State	Responsible Person: NYTKS	Branch: R1	
CA Component: N		Disposition Status: AS	06/22/10	Appeal Initiated:	Appeal Resolved:

Violation:	Activity Location: NY	Type: 273.B	Determined Date: 06/02/2010	Determined by Agency: State	Responsible Agency: State
	Scheduled Compliance Date:		Actual Compliance Date: 06/02/2010	RTC Qualifier: DOCUMENTED	Sequence Number: 2
	Citation Information: Seq #	Type	Citation		
	2	STATE REGULATION	374-3.2(e)		
CEI Evaluation	06/02/2010	Activity Location: NY	By: State	Identifier: 001	Person: NYTKS
Citizen Complaint: NO		Multimedia Inspection: NO	Sampling: NO	Not Subtitle C: NO	Day Zero: 06/02/2010
Found Violation: YES					Focus Area:
Enforcement:	Activity Location: NY	Type: 120	Action Date: 06/22/2010	Identifier: 001	
Docket:		Agency: State	Responsible Person: NYTKS	Branch: R1	
CA Component: N		Disposition Status: AS	06/22/10	Appeal Initiated:	Appeal Resolved:

Violation:	Activity Location: NY	Type: 273.B	Determined Date: 06/02/2010	Determined by Agency: State	Responsible Agency: State
	Scheduled Compliance Date:		Actual Compliance Date: 06/02/2010	RTC Qualifier: DOCUMENTED	Sequence Number: 3
	Citation Information: Seq #	Type	Citation		
	3	STATE REGULATION	374-3.2(f)		
CEI Evaluation	06/02/2010	Activity Location: NY	By: State	Identifier: 001	Person: NYTKS
Citizen Complaint: NO		Multimedia Inspection: NO	Sampling: NO	Not Subtitle C: NO	Day Zero: 06/02/2010
Found Violation: YES					Focus Area:
Enforcement:	Activity Location: NY	Type: 120	Action Date: 06/22/2010	Identifier: 001	
Docket:		Agency: State	Responsible Person: NYTKS	Branch: R1	
CA Component: N		Disposition Status: AS	06/22/10	Appeal Initiated:	Appeal Resolved:

* Note: Penalty amount may not reflect all violations cited.

FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: February 8, 2016 - 3:56 PM

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Total Number of Handlers: 1

Total Number of Activity Locations: 1

* End of Report *

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FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

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Description of codes used on the report:

Universes	Description of Universes
Generator	Indicates that the facility is a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Conditionally Exempt Small Quantity Generator (CEG), or not a generator (N).
Transporter	Indicates that the facility Transports waste subject to RCRA regulations. ('Y' indicates that the facility is in this universe).
Operating TSDF	Indicates that the facility is a Treatment, Storage or Disposal facility subject to any type of enforcement. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
IC in Place	Indicates that the facility has Institutional Controls in place. ('Y' indicates that the facility is in this universe).
EI Indicator (HE / GW)	Indicates that the facility has controls in place for Environmental Indicators. HE - Human Exposures ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist) GW - Groundwater Release ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control; 'N' indicates the exposure does not exist)
Short-Term Gen	Indicates that the facility is a short term or one time event generator and not generating from ongoing processes.
Transfer Facility	Indicates that the facility transfers hazardous waste.
Offsite Receiver	Indicates that the facility, whether public or private, currently accepts hazardous waste from another site (site identified by a different EPA ID).
HSM	Indicates that the facility manages hazardous secondary material(s) (e.g. spent material, by-product or sludge) that when discarded, would be identified as hazardous waste.
Subpart K	Indicates that the facility has opted into the subpart K laboratory rule. It then specifies the type of facility (C - College or University; H - Teaching Hospital; N - Non-profit Research Institute; W - withdrawal from the rule)
Full Enforcement	Indicates that the facility is a Treatment, Storage or Disposal facility which is part of the Full Enforcement universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
CA Workload	Indicates that the facility is part of the Corrective Action Workload universe. ('Y' indicates that the facility is in this universe).
Active State Gen	Indicates that the facility is an Active State Generator. ('Y' indicates that the facility is in this universe).
Converter	Indicates that the facility is a Converter Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
State TSDF	Indicates that the facility is a State Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)
State Unaddressed SNC	Indicates that the facility is a State Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
State Addressed SNC	Indicates that the facility is a State Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
State SNC w/ Compl. Sched	Indicates that the facility is a State Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).
EPA Unaddressed SNC	Indicates that the facility is an EPA Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
EPA Addressed SNC	Indicates that the facility is an EPA Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).
EPA SNC w/ Compl. Sched	Indicates that the facility is a EPA Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).

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Description of codes used on the report:

ACCESSIBILITY - indicates the reason why the handler is not accessible for normal RCRA tracking and processing (previously called Bankrupt Indicator):	
Code	Description
B	indicates that the handler has filed for bankruptcy and bankruptcy litigation is in process.
C	indicates that all RCRA responsibilities for permitting/closure, corrective action, and compliance monitoring and enforcement at the facility have been formally transferred to the CERCLA program or state equivalent.
F	indicates that all responsible parties (owners/operators) for the handler have fled the country or are otherwise not available for prosecution.
L	indicates that the handler's case is tied up in litigation to the extent that further progress in achieving RCRA compliance through normal enforcement is not possible.

NON-NOTIFIER - indicates that the handler has been identified through a source other than Notification and is suspected of conducting RCRA-regulated activities without proper authority:	
Code	Description
E	indicates that the handler was initially a non-notifier, subsequently determined to be exempt from requirements to notify.
O	indicates that the handler is a former non-notifier.
X	indicates that the handler is a non-notifier.

Violation Type	Description
273.B	UNIVERSAL WASTE - SMALL QUANTITY HANDLERS

Evaluation Type	Type Description
CEI	COMPLIANCE EVALUATION INSPECTION ON-SITE

Enforcement Type	Enforcement Description
120	WRITTEN INFORMAL

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